## SIG CHILDREN'S MENTAL HEALTH AND SUBSTANCE ABUSE ACADEMIC SUBCOMMITTEE

#### **Meeting Minutes from August 5, 2005**

Facilitator: Todd Glover

# In Attendance: Blaine Schaffer, Brian Wilcox, Rich Wiener, Deb Anderson, Chris Kratochvil, Leah

Agree that several areas of expertise are missing from group:

- Consumers including children and families
- Policymakers
- Substance abuse experts (Blaine suggested Kate Speck at Doane Lincoln Campus. However, Kate is facilitating another group and is therefore unavailable)
- Representation from University of Nebraska-Kearney and private colleges/universities
- Developmentalists
- Diverse ethnic/racial representation

Yes, there are gaps, ideas or area of representation desired:

- Need someone who is knowledgeable of existing programs and practices available.
- Expertise in developmental psychology
- Policymakers
- Substance abuse experts
- Representation from University of Nebraska-Kearney and private colleges/universities
- Missing expertise in our own technology. What technology and computer programs are available to assist us and others with similar interests in completing these sorts of tasks? (Example: Debra Anderson Technology expertise lacking; Idea: Orion Health Care Technology developed a software to assess substance abuse and it takes into account case management. Can we utilize this?)

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#### Additional information needed to complete charges:

- Knowledgeable of existing programs and practices
- List of people who are currently doing research and their research domains. Are there institutes doing research that most aren't familiar with?
- SAMHSA/Other professional standards for Evidence Based Practices (EBP's).

#### Deliverable Goals of group

- Report for steering committee
- List of programs (EBP's)

- List of researchers
- Compilation of EBP's, standards for: Social Work, Criminal Justice, Psychologists, Psychiatrists
- What can we do in social work and psychology to prepare our students to implement what they have learned into a job? <u>Recommendations for preparing practitioners to use evidence based practices (EBP's).</u>
- Discussion: State is interested in capitalizing on resources; Charge 3 (listed below) meant to see how state can make use of existing resources. Should state refuse to pay for services unless they meet minimum standards? We can't evaluate that for the state. We can leave it open by recommending criteria for evaluating whether practices have evidence base standards. (Based on compiled lists of researchers and programs)

### Charge 3: "Identify:

- A. Processes to improve use of existing research-based knowledge in public policy
- B. Critical issues to policy makers,
- C. Research approaches that help address these issues
- D. Strategies to encourage implementation of research"
- Need an evaluating document for organizations that shows what each is doing in everyday operations.
- List of gaps in critical issues (Charge 3, B).
- List of incentives for programs to meet expected criteria set forth by group.
- List several ways to address issues listed in Charge 3, C.
- Report of existing use of best practices.

#### Operating Agreement/Expectations

- Start on time; end on time
- Be present
- Be respectful
- Strategic location/teleconferencing for convenience (maybe Quarry Oaks?)
- Bring relevant information to the group's attention

#### Decision making

- Timed consensus (make point and move on)
- Minority report for anyone who disagrees who signs on with end product. Consenting opinion. These two reports need not be mutually exclusive.

Because group is so small, it was decided that the whole group would participate for the time being. Branching out may occur later if needed and agreed upon by the group.

Process for completing tasks/meetings:

- Have people work on different tasks and meet up in a month to touch base. Tasks designated for # 10 below with an asterisk (\*) should be completed by next meeting unless otherwise specified.
- Those tasks with no one specified have not been assigned yet and will be assigned at future meetings.
- Meetings will be scheduled monthly. We will reassess frequency of meetings at next meeting.
- Meetings will last 90-120 minutes but not longer than that.
- Send out information for review via email prior to next meeting

How will we know if we have succeeded?

- Completion of the following deliverables by December (person responsible is in parentheses):
  - o List of existing mental health/substance abuse programs (Blaine)\*
  - o List of mental health/substance abuse researchers (Rich)\*
  - o Compilation of standards for evidence based practices (EBP's) from social work, criminal justice, psychology, and psychiatry. (Leah, Deb)\*
  - Recommendations for preparing practitioners to use evidence based practices (EBPs)
  - Recommendations for EBP evaluation criteria, or standards (Although we can't decide whether the state should refuse to pay for services that don't meet minimum standards, we can suggest methods and incentives for addressing criteria.)
  - o List of gaps between research and practice
  - o Report of existing use of best practices
  - o Final Report for steering committee

To Do for group- Disseminate information that is gathered before next meeting; HHS/PPC- email list of group contact info; request for availability for meeting in 1 month.